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0010/PTO Rev. 6/95	U.S. Department Patent and Trader		e First Nar	med Inventor	ROBER	OBERT DE FRANCE			
			COMPLETE IF KNOWN						
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			Examine	r Name					
My residence, post o	ventor, I hereby declare that ffice address, and citizensh Iginal, first and sole invent w) of the subject matter wi	ip are as state or (if only on	ne name is li	sted below) or an o	original, first and tht on the inventi	joint inventor (if on entitled:			
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hereby state that	have reviewed and unde	erstood the c	ontents of 1	he above-identified	specification, in	ncluding the claim			
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nventor's certificate, States of America, lis	n priority under Title 35, Un or § 365 (a) of any PCT i sted below and have also ic PCT international applicatio	international a dentified belo	application w w, by check	thich designated at ing the box, any for	least one countr eign application	y other than the U for patent or inver			
Prior Foreign Application Numbers	Country	Foreign Fi (MM/DD		Priority Not Clair	med	Copy Attached Yes No			
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DECLARATION												Page 2		
I hereby claim the benefit under Title 35, United States Code \$120 of any United States application(s), or \$365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code \$112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Title Code of Federal Regulations \$1.56 which became available between the filling date of the prior application and the national or PCT International filling date of this application.														
United States Parent Application Number			PCT Pare	nt Number				Parent Filing Data (MM/DD/YYYY)			Parent Patent Number (if applicable)			
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Additional U.S. Or PCT International Application Numbers Are Listed On A Supplementary Priority Sheet Attached Hereto:										hed Hereto:				
As a named inventor, I hereby appoint in the registered practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office therewith, and direct that all correspondence be addressed to that Customer Number:														
Firm N	Firm Name: Alix, Yale & Ristas, LLP Customer Number: 002543													
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name	Of Sole (	Or First Inve	ntor					]A P	etition	Has Beer	Filed I	or This	Unsi	gned inventor
1		Middle Initial			DE FRANCE				Su	ffix				
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POST OFFICE 48 Catskill Avenue ADDRESS														
City	Pough	keepsie	State	NY	Zip 12603		603	Со	untry U.S.A		۱.	Applic Author		
Name	Name Of Additional Joint Inventor, If Any:   A Petition Has Been Filed For This Unsigned Inventor													
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Additional Inventors Are Being Named On Supplemental Sheet(s) Attached Horato.														